

# **Testimony**

All fields marked "(\*)" are required and must be completed in order for this form to be valid.  
 Note: Registrations are not accepted prior to the agendas being posted.

**Name(\*)** kohl christensen  
**Phone (\*)** 8087787840  
**Email (\*)** kohlchristensen1@gmail.com  
**Meeting Date (\*)** 2015-09-02  
**Council/PH Committee (\*)** Zoning  
**Agenda Item (\*)** G CR-335 Bill 20, CD1  
**Your position on the matter (\*)** Support  
**Representing (\*)** Self  
**Organization**  
**Do you wish to speak at the hearing? (\*)** No  
**Written Testimony** i believe ad property owners should have the right to have a family dwelling. Either for family or for help on the farm.  
**Testimony Attachment**  
**Accept Terms and Conditions (\*)** 1

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 2015 SEP -2 AM 10:02